

09/979541

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected                      N ..... Non-elected  
= ..... Allowed                      I ..... Interference  
- (Through numeral)... Canceled                      A ..... Appeal  
+ ..... Restricted                      O ..... Objected

BEST AVAILABLE COPY

Claim		Date	
Final	Original		
1	10/13/02		
2	01/22/03		
3	03/03/03		
4	04/22/04		
5			
6	✓	✓	✓
7	✓	✓	✓
8	✓	✓	✓
9	✓	✓	✓
10	✓	✓	✓
11	✓	✓	✓
12	✓	✓	✓
13	✓	✓	✓
14	✓	✓	✓
15	✓	✓	✓
16	✓	✓	✓
17	✓	✓	✓
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Claim		Date	
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Claim		Date	
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If more than 150 claims or 10 actions  
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